

2010 MONTANA SHRAB PROFESSIONAL DEVELOPMENT SCHOLARSHIP

The Montana State Historical Records Advisory Board (SHRAB) is pleased to announce the continued availability of scholarship funds of up to \$500 to paid and volunteer staff of Montana's cultural heritage institutions to attend training, educational workshops, or courses on topics related to the management and/or preservation of historical records. Scholarship funds may cover registration fees, travel costs, lodging and a per diem for food. Funding may also be used to bring recognized experts into an institution for consultation related to the management, accessibility, or preservation of the historical records in its care. Scholarship funds are made possible through a grant from the National Historical Publications and Records Commission (NHPRC).

Scholarship recipients will be notified within 15 business days of receipt of the application.

Please send your complete application to

Montana State Historical Records Advisory Board
Montana Historical Society
P.O. Box 201201
Helena, MT 59620-1201

Telephone: (406) 444-7482
Fax: (406) 444-5297
Email: jofoley@mt.gov

APPLICATION FOR TRAINING/WORKSHOP ATTENDANCE:

Applicant Name: _____ Institution: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

Have you ever attended archival training or conferences? Yes No

Are you a paid employee of a library/museum/archives? Yes No

If yes, what is your title and how many hours per week do you work? _____

Are you a volunteer at a library/museum/archives? Yes No

If yes, how many hours per week do you volunteer? _____

What is your institution's annual budget? _____

Will your institution pay for professional training? Yes No

Name of workshop/conference/training you wish to attend: _____

Amount requested: Registration fee(s): _____ Travel/per-diem: _____ Total amount: _____

What are your reasons for attending this training, workshop, conference, etc.? How do they fit your professional goals? How do they fit your institutions goals?

Briefly outline your experience with archives and any special archival projects that you have worked on or are currently involved in.

APPLICATION FOR ON-SITE ASSISTANCE:

Applicant Name: _____ Institution: _____

Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

What is your institution's annual budget? _____

Does your institution have paid employees? _____ Yes _____ No

Their positions and how many hours a week they work:

Does your institution have volunteers? _____ Yes _____ No

Name of consultant you wish to hire: _____

Consultant's qualifications:
(Please attach a copy of their vita)

Amount requested:

Fee(s): _____

Travel/per-diem: _____

Materials:

Total amount: _____

What types of training and assistance will the consultant offer your institution? How do they fit your institutions goals?

Briefly outline your institution's experience with archives and any special archival projects that you have worked on or are currently involved in.